| Application or Docket Number   |   |   |                       |            |                      |                  |                |  |                        |          |            |                        |      |
|--|---|---|-----------------------|------------|----------------------|------------------|----------------|--|------------------------|----------|------------|------------------------|------|
|  | PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  09/779135   |   |                       |            |                      |                  |                |  |                        |          |            |                        |      |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |   |                       |            |                      |                  |                | MALL EN  | шү .<br>Э              | OR       | OTHER      |                        |      |
| TOTAL CLAIMS   |   |   | 20                    |            |                      |                  |                | RATE   | FEE                    | [        | RATE       | FEE                    |      |
| FOR  |   |   | NUMBER FILED          |            | NUMBER EXTRA         |                  | 8              | ASIC FEE   | 355.00                 | OR       | BASIC FEE  | 710.00                 |      |
| TOTAL CHARGEABLE CLAIMS  |   |   | 20 minus 20=          |            | . \$                 |                  |                | X\$ 9=   |                        | OR       | X\$18=     | ~                      |      |
| INDEPENDENT CLAIMS   |   |   | 3 minus 3 =           |            | φ                    |                  | t              | X40=   |                        | OR       | X80=       | -                      | ٠.   |
| MU   | LTIPLE DEPEN  | DENT CLAIM PE                             | RESENT                |            |                      |                  | T              | +135=  | _                      | OR       | +270=      | ~                      |      |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |   |   |                       |            |                      |                  |                | TOTAL  |                        |          | TOTAL      | 9h                     | ·    |
| CLAIMS AS AMENDED - PART II  |   |   |                       |            |                      |                  |                | ·  |                        | ,        | OTHER      | THAN                   |      |
|  |   | (Column 1)                                |                       | (Colu      | mn 2)                | (Column 3)       | _              | SMALL E  |                        | OR       | SMALL      |                        | 4    |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                       |            |                      | PRESENT<br>EXTRA |                | RATE   | ADDI-<br>TIONAL<br>FEE |          | RATE       | ADDI-<br>TIONAL<br>FEE |      |
|  | Total   | . 19                                      | Minus                 | 2          | 20                   | =                | F              | X\$ 9=   |                        | OR       | X\$18=     |                        |      |
|  | Independent   | . 3                                       | Minus                 | ***        | 3                    | -                | <u> </u>       | X40=   |                        | OR       | X80=       |                        |      |
|  | FIRST PRESE   | NTATION OF M                              | ULTIPLE DEPENDENT CLA |            |                      |                  |                | +135=  | . 2.5 % *              | OR       | +270=      |                        |      |
|  |   |   |                       |            |                      |                  | L              | TOTAL  | , ,                    |          | TOTAL      |                        |      |
| ;  |   |   | ن المصيد              | ·          | mn 2) (Column 3)     |                  | A              | DDIT. FEE  |                        | JON.     | ADDIT. FEE |                        |      |
| AMENDMENT B  |   | (Column 1)                                |                       | HIG        | mn 2)<br>HEST        |                  | Г              | <del>-                                    </del> | ADDI-                  |          | - Par      | ADDI-                  |      |
|  |   | REMAINING<br>AFTER<br>AMENDMENT           |                       | PREV       | ABER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |                | RATE   | TIONAL<br>FEE          |          | PATE       | TIONAL<br>FEE          |      |
|  | Total   | · 20                                      | Minus                 | • 7        | 0                    | <u>.</u> 🕘       |                | X\$ 9=   |                        | OR       | X\$18=     | (:                     |      |
|  | Ind pendent   | • 4                                       | Minus                 | . 400      | 3_                   | =                | $\cdot \Gamma$ | X40=   | جۇن ئەيب               | OR:      | ~ X80=     | 88                     |      |
| L  | FIRST PRESE   | NTATION OF M                              | ULTIPLE DEF           | PENDEN     | TCLAIM               |                  | T              | +135=  | ÷                      | OR       | +270=      |                        |      |
|  |   | ·, -                                      |                       |            |                      | ,                | L              | TOTAL  |                        | OR.      | TOTAL      |                        | 1 1  |
| :  |   | (Column 1)                                |                       | (Calc      | ımn 2)               | (Column 3)       |                | DOIT. FEE  |                        |          | ADUIT. FEC |                        | •    |
|  |   | (Column 1)<br>CLAIMS                      |                       | HIG        | HEST                 | PRESENT          | Γ              |  | ADDI-                  |          |            | ADDI-                  |      |
| AMENDMENT C  |   | REMAINING<br>AFTER<br>AMENDMENT           |                       | PREV       | HOUSLY<br>FOR        | EXTRA            |                | RATE   | TIONAL<br>FEE          | ,        | RATE       | TIONAL<br>FEE          | - /- |
|  | Total   | • AMENDMENT                               | Minus                 | ••         |                      | =                |                | X\$ 9=   |                        | OR       | X\$18=-    | . 7                    |      |
|  | Independent   | •   | Minus                 |            |                      | 5                |                | X40=   |                        | OR       | X80=       | 71                     |      |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                      |   |                       |            |                      |                  |                |  |                        |          | +270=      |                        |      |
|  | If the entry in column 1 is I so than the entry in column 2, write "O" in column 3. |   |                       |            |                      |                  |                | +135=  |                        | OR       | 101AL      | 130                    |      |
| "If the entry in column 1 is 1 so than the entry in column 2, while "I the "Highest Number Pr viously Paid For" IN THIS SPACE is less than 20, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |                       |            |                      |                  |                |  |                        |          |            | 1                      |      |
|  | The "Highest Nu   | mber Previously Pa                        | aid For (Total o      | or Indeper | rdent) is t          | ne highest numb  | r fou          | nd in the ap                                     | propriate bo           | ox in co | olumn 1.   |                        |      |